

Apple Health (Medicaid) Opioid Clinical Policy Q&A for Pharmacies (Updated November 22, 2017)

What expedited authorization (EA) codes can I use for opioid prescriptions? How do I enter them into my pharmacy software? When do I need to call the pharmacy help desk?

Expedited Authorization codes provide immediate overrides when patients or prescriptions meet certain criteria. Sometimes, you will need to enter a Submission Clarification Code (SCC) or a PA type and PA number. For other situations, you will need to call the pharmacy help desk to load authorizations for certain patients, which will allow future prescriptions to be filled without needing to use codes. Below is a table with instructions for what codes to use or who to call when presented with any of these patient or prescription criteria.

Patient or prescription criteria	Coordinated Care Molina Apple Health (Fee- for-service)	United Health Care	Community Health Plan of Washington (CHPW)	Amerigroup
Patient is in active cancer treatment, hospice care, palliative care, or other end- of-life care.	PA Number: 8500000540	SCC 02	SCC 7	SCC 7
Prescriber has indicated "EXEMPT" on the prescription. (acute use only)	PA Number: 85000000541	SCC 99	SCC 11	SCC 11
Patient is known to be a chronic opioid user at the currently prescribed dose prior to plan enrollment	PA Number: 85000000542	Pharmacies call: 1-888-306-3243	SCC 2	SCC 2
Patient is a known chronic user and pharmacy is dispensing up to 7 day supply while requesting attestation form from prescriber	PA Number: 85000000542	PA Type: 8 PA Number: 3	SCC 2	SCC 2
Patient is known to be a chronic opioid user and has had at least one opioid prescription filled in three of the previous four months (prior to November 1)	Pharmacies call pharmacy help desk Providers call provider line	Pharmacies call: 1-888-306-3243 Providers call: 1-800-310-6826	Pharmacies call: 1-800-922-1557 Providers call: 1-844-605-8168	Pharmacies call: 1-844-367-6113 Providers call: 1-800-454-3730

Expedited authorization (EA) codes or phone numbers by plan:





Who is Calling?	Amerigroup	Apple Health Medicaid (Fee-for-service)	Coordinated Care	Community Health Plan of Washington (CHPW)	Molina	United Health Care
Pharmacies	1-844-367-6113	1-800-562-3022 extension: 15483	1-877-644-4613 Ext. 69622	1-800-922-1557	1- 800-213-5525 options 1,2,2	1-888-306-3243
Providers (questions)	1-800-454-3730	1-800-562-3022	1-877-644-4613 Ext. 69622	1-844-605-8168	1-800-213-5525 options 1,2,2	1-877-542-9231
Providers (authorizations by phone)	1-800-454-3730	1-800-562-3022 extension: 15483	1-855-757-6565	1-844-605-8168	1-800-213-5525 options 1,2,2	1-800-310-6826
Providers (authorizations by fax)	1-800-359-5781	1-866-668-1214	1-866-399-0929	1-877-251-5896	1-800-869-7791	1-866-940-7328
Patients	1-800-600-4441	1-800-562-3022	1-877-644-4613	1-844-605-8168	1-800-869-7165	1-877-542-8997

When do I use an EA code for exempt? Does this work for chronic rejects?

You will use this EA code when prescriptions have the word "exempt" typed in the notes or in the sig. If "exempt" is handwritten, you must call the provider to verify. This EA code does not work for chronic opioid use and only for the acute pill limits.

When do I use an EA code for cancer pain or pain related to hospice, palliative care, or end-of-life care?

You will use this EA code when "for cancer pain" or "for palliative care" or appropriate diagnoses are on the prescription. You can also verify these diagnoses from patient charts, your pharmacy claims history, or from the patient. You must document the condition on the prescription when using this EA code. This EA code overrides all opioid rejection types.

When do I use an EA code for chronic user new to the plan?

You will use this EA code when a member is new to the health plan within the last 120 days.

What do I do when I get a reject for chronic use?

If a patient is transitioning beyond 42 days of opioid therapy in a 90 day period, the prescription will reject saying a prior authorization is required. This will require the provider to submit an attestation form to the plan. Pharmacies can call or fax the pharmacy help desk to start the process where the health plan will send the attestation form to the provider. Providers can also sign the attestation form and fax it to pharmacies to send to the health plans.

If you believe this member meets the grandfathering criteria of the policy (had at least 90 days of opioids in the previous 120 days from November 1) or they have had at least one opioid prescription filled in three of the last four months prior to November 1, either the pharmacy or provider can call the health plan to load the authorization for the patient.

Who do I contact when I have a general question about the policy?

For general questions, please contact Health Care Authority at <u>applehealthpharmacypolicy@hca.wa.gov</u>

Clinical Quality and Care Transformation Division November 22, 2017

